



PATENT  
Atty Dkt No. 120723

IN THE UNITED STATES OFFICE OF PATENTS AND TRADEMARKS

Applicant: Mikel Gee

Serial Number: 09/683,300

Group Art Unit: 2125

Filed: December 11, 2001

Examiner: Kasenge, Charles R.

For: DISTRIBUTED POWER  
DELIVERY SYSTEM

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER OF PATENTS AND TRADEMARKS**

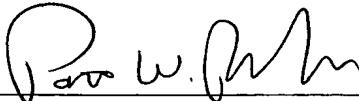
Express Mail mailing label number: **EV 504793539 US**

Date of Mailing: **November 3, 2004**

I certify that the documents listed below:

- Certificate of Express Mailing (1 pg.)
- Amendment Transmittal (3 pgs., *in duplicate*)
- Amendment in Response to the Office Action dated September 30, 2004 (13 pgs.)
- IDS Transmittal (2 pgs., *in duplicate*)
- PTO Form PTO/SB/08A listing one (1) reference – 6,150,736
- Copy of IDS reference – U.S. Patent 6,150,736 (6 pgs.)
- Return Post Card

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Mail Stop: AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
\_\_\_\_\_  
Patrick W. Rasche  
Reg. No. 37,916  
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St. Louis, MO 63102-2740  
(314) 621-5070



PATENT  
Attorney Docket No.: 120723

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Mikel Gee	:	
Serial No.:	09/683,300	:	Group No.: 2125
Filed:	December 11, 2001	:	Examiner: Kasenge, Charles R.
For:	DISTRIBUTED POWER DELIVERY SYSTEM	:	

**Mail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:
  - Amendment in Response to the Office Action dated September 30, 2004 (13 pgs.)
  - Amendment Transmittal (3 pgs., *in duplicate*)
  - Return post card

**STATUS**

2. Applicant
  - claims small entity status.
  - is other than a small entity.

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Patrick W. Rasche, Reg. No. 37,916

## EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a)  Applicant petitions for an extension of time under 37 C.F.R. 1.136  
 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:		Other than small entity Fee	Small entity Fee (if applicable)
	<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
	<input type="checkbox"/> second month	\$ 430.00	\$ 215.00
	<input type="checkbox"/> third month	\$ 980.00	\$ 490.00
	<input type="checkbox"/> fourth month	\$1,530.00	\$ 765.00
	<input type="checkbox"/> fifth month	\$2,080.00	\$1,040.00

Fee Due \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

- An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

OR

- (b)  Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY		OTHER THAN SMALL ENTITY
				PRESENT EXTRA	ADDITIONAL RATE FEE	
TOTAL INDEP.		MINUS	=	x \$9 = \$		x \$18 = \$
		MINUS	=	x \$44 = \$		x \$88 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$150 = \$		+ \$300 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a)  No additional fee for Claims is required

**OR**

(b)  Total additional fee for claims required \$ \_\_\_\_\_

**FEE PAYMENT**

5. Attached is a check in the sum of \$ \_\_\_\_\_

Charge Deposit Account No. 01-2384 the sum of \$ \_\_\_\_\_.  
A duplicate of this transmittal is attached.

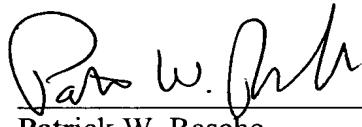
**FEE DEFICIENCY**

6.  If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7.  Other:



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